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APPLICATION NUMBER	FILING/RECEIPT DATE	FIRST NAMED APPLICANT	ATTORNEY DOCKET NUMBER
10/062,143	01/31/2002	Gad S. Sheaffer	42390P11127

CONFIRMATION NO. 2525

008791

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12400 WILSHIRE BOULEVARD, SEVENTH FLOOR  
LOS ANGELES, CA 90025

## FORMALITIES LETTER



\*OC000000007575718\*

Date Mailed: 03/04/2002

## NOTICE TO FILE MISSING PARTS OF NONPROVISIONAL APPLICATION

FILED UNDER 37 CFR 1.53(b)

*Filing Date Granted*

An application number and filing date have been accorded to this application. The item(s) indicated below, however, are missing. Applicant is given **TWO MONTHS** from the date of this Notice within which to file all required items and pay any fees required below to avoid abandonment. Extensions of time may be obtained by filing a petition accompanied by the extension fee under the provisions of 37 CFR 1.136(a).

- The oath or declaration is missing.  
*A properly signed oath or declaration in compliance with 37 CFR 1.63, identifying the application by the above Application Number and Filing Date, is required.*
- To avoid abandonment, a late filing fee or oath or declaration surcharge as set forth in 37 CFR 1.16(l) of \$130 for a non-small entity, must be submitted with the missing items identified in this letter.
- **The balance due by applicant is \$ 130.**

The application is informal since it does not comply with the regulations for the reason(s) indicated below.

The required item(s) identified below must be timely submitted to avoid abandonment:

- Substitute drawings in compliance with 37 CFR 1.84 because:
  - drawing sheets do not have the appropriate margin(s) (see 37 CFR 1.84(g)). Each sheet must include a top margin of at least 2.5 cm. (1 inch), a left side margin of at least 2.5 cm. (1 inch), a right side margin of at least 1.5 cm. ( 5/8 inch), and a bottom margin of at least 1.0 cm. (3/8 inch);

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*A copy of this notice MUST be returned with the reply.*

Tseyeredu



Please type a plus sign (+) inside this box → +

PTO/SB/21 (08-00)

Approved for use through 10/31/2002. OMB 0651-0031

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# TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

Application Number	10/062,143
Filing Date	01-31-2002
First Named Inventor	Gad S. Sheaffer
Group Art Unit	2182
Examiner Name	Not yet assigned
Attorney Docket Number	42390P11127

Total Number of Pages in This Submission

## ENCLOSURES (check all that apply)

- |   |  |  |
|---|--|--|
| <input checked="" type="checkbox"/> Fee Transmittal Form                                | <input type="checkbox"/> Assignment Papers (for an Application)  | <input type="checkbox"/> After Allowance Communication to Group                            |
| <input checked="" type="checkbox"/> Fee Attached  | <input checked="" type="checkbox"/> Drawing(s)   | <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences        |
| <input type="checkbox"/> Amendment / Reply  | <input type="checkbox"/> Licensing-related Papers  | <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) |
| <input type="checkbox"/> After Final  | <input type="checkbox"/> Petition  | <input type="checkbox"/> Proprietary Information   |
| <input type="checkbox"/> Affidavits/declaration(s)                                      | <input type="checkbox"/> Petition to Convert to a Provisional Application  | <input type="checkbox"/> Status Letter   |
| <input type="checkbox"/> Extension of Time Request                                      | <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address  | <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below):            |
| <input type="checkbox"/> Express Abandonment Request                                    | <input type="checkbox"/> Terminal Disclaimer   | -30 sheets of formal drawings  |
| <input checked="" type="checkbox"/> Information Disclosure Statement                    | <input type="checkbox"/> Request for Refund  | -Declaration and Power of Attorney for Patent Application (5 pages)                        |
| <input type="checkbox"/> Certified Copy of Priority Document(s)                         | <input type="checkbox"/> CD, Number of CD(s) _____   | -3 IDS references  |
| <input checked="" type="checkbox"/> Response to Missing Parts/ Incomplete Application   | Remarks  | -check   |
| <input checked="" type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53 | Please credit any overpayment or charge any fees or fee deficiencies in connection with this communication to our Deposit Account No. 02-2666. |  |
|   |  |  |

## SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm or Individual name	William W. Kidd, Reg. No. 31,772
Signature	<i>William W. Kidd</i>
Date	5-3-02

## CERTIFICATE OF MAILING

I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, Washington, DC 20231 on this date: 5/3/02

Typed or printed name	Shenise Ramdeen	Date	5/3/02
Signature	<i>Shenise Ramdeen</i>		

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.